Major Compulsory Revisions

Thank you for the opportunity to review this submission on informal and formal help for mental health problems in a community sample. The topic of informal supports is important, especially considering that many populations lack access to formal mental health services and/or outright refuse such services. The authors make use of a nicely sized community sample for exploring this research question and should be commended for tackling this important topic. The paper, however, does elicit some questions and concerns that warrant attention.

A quick glance at the research literature (i.e., keyword “informal support”) yielded a high volume of hits, and perusing these articles, it appears there is actually a non-negligible research base on this topic as it pertains to the pursuit and outcomes of mental health. The authors are correct in stating that a large set of these studies focus on a specific disadvantaged group or demographic, but the state of the research seems much richer than what is conveyed in the manuscript. It would be helpful if the authors more clearly articulated how this paper contributes above and beyond this seemingly undersold research literature.

The authors duly acknowledged concerns with study generalizability, and this is a sizable limitation. Based on the sample frame, it’s unclear if factors related to informal and formal support are idiosyncratic to the two boroughs in South East London. The authors nicely discuss the representativeness of the sample with respect to the catchment area, but equally if not more importantly, how does the sample relate to other populations/areas? Such a limited area is bound to be associated with influences that skew the results. For example, in the area, how strong is mental health stigma/shame? What about stigma of seeking formal or informal services? What is the climate of mental health service in the country—is it affordable, accessible? Is supply of formal mental health service abundant in those two boroughs? Answers to questions like these seem critical given the narrow area from which the sample was drawn and are likely to have influenced the nature of formal and informal support usage. Ultimately, the degree to which this paper could inform our general understanding of informal and formal service use hinges on whether or not the findings can transcend South East London.
It makes sense that psychiatric diagnosis would influence the use of formal and informal support. In fact, this is probably why the informal support research literature is replete with studies on very specific populations (e.g., Asian American child abuse victims). It’s disappointing that so few clinical syndromes were included in the current study, and that most of these syndromes overlapped so significantly with each other in phenomenology (e.g., GAD, non-specified neurotic disorder). As a result, it’s a bit unclear what inferences can be drawn about psychiatric syndromes in the context of informal and formal support usage.

The data analytic approach needs some clarification. How was inflated error rate addressed given the high volume of point hypothesis tests? How was statistical power addressed? For example, in the chi-square analyses, was the study overpowered such that relatively tiny and non-impactful effect sizes were statistically significant? Providing effect sizes for these chi square analyses could help address this concern. On the other hand, were the logistic regression analyses sufficiently powered? Given the presumably large number of variables included in the models (especially if categorical variables were dummy coded into multiple variables) and reduced sample size of 666, low power is a legitimate concern that could undermine interpretation of non-significant statistical effects. Some of this confusion could be avoided with discussion of power and transparency with respect to the size of the models (e.g., what were the degrees of freedom?).

Level of interest: An article of importance in its field

Quality of written English: Acceptable

Statistical review: No, the manuscript does not need to be seen by a statistician.

Declaration of competing interests:

I declare that I have no competing interests